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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number

10/059890

CLAIMS AS FILED - PART I

(Column 1)	(Column 2)		
FOR	NUMBER FILED	NUMBER EXTRA	
BASIC FEE (37 CFR 1.10(a))			
TOTAL CLAIMS (37 CFR 1.10(c))	minus 20 *	*	
INDEPENDENT CLAIMS (37 CFR 1.10(b))	minus 3 *	*	
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.16(d))	
* If the difference in column 1 is less than zero, enter '0' in column 2			
SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
RATE	FEE	RATE	FEE
X \$	\$	X \$	\$
X \$		X \$	
X \$		X \$	
X \$		X \$	
TOTAL		OR	TOTAL

CLAIMS AS AMENDED - PART II

(Column 1)	(Column 2)	(Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(e))	23	Minus	24
Independent (37 CFR 1.10(e))	13	Minus	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X \$	25	X \$	
X \$	100	X \$	
X \$		X \$	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE

(Column 1)	(Column 2)	(Column 3)	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(e))	*	*	*
Independent (37 CFR 1.10(e))	*	*	*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X \$		X \$	
X \$		X \$	
X \$		X \$	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE

(Column 1)	(Column 2)	(Column 3)	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(e))	*	*	*
Independent (37 CFR 1.10(e))	*	*	*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X \$		X \$	
X \$		X \$	
X \$		X \$	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE

* If the entry in column 1 is less than the entry in column 2, write '0' in column 3

** If the Highest Number Previously Paid For in this space is less than 20, enter '20'

*** If the Highest Number Previously Paid For in this space is less than 3, enter '3'

The Highest Number Previously Paid For is the highest number found in the appropriate line of column 3.

This form is subject to change at any time. The information is required to obtain or retain a benefit by the public which is to be paid by the requester or user under 35 U.S.C. 1.22 and 37 CFR 1.14. This collection is authorized by 35 U.S.C. 122 and 37 CFR 1.14. The burden is estimated to be 1 hour per response. This estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments concerning this burden estimate or any other aspect of the collection of information (including suggestions for reducing the burden) to the Office of Management and Budget, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. (DO NOT SEND FEES OR PAYMENT TO THE ADDRESS ON THIS FORM.) Questions concerning this form, P.O. Box 1450, Alexandria, VA 22313-1450.

BEST AVAILABLE COPY

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Shawn